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### Technical tip

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## Short Communication

## Technical tip: Identifying the boundaries of the urethral plate in TIP Urethroplasty

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Hypospadias is one of the most common congenital birth defects occurring in approximately 1 in 300 live male births. Corrective surgery aims to correct the position of the urethral meatus forming a slit like meatus in the glans.<sup>1</sup> Tubularized Incised Plate Urethroplasty originally described by Snodgrass in 1994<sup>2</sup> has been shown to be effective in treating distal hypospadias and associated with a low rate of complications (4%).<sup>1,3</sup> It is the most commonly performed operation for distal and mid penile shaft hypospadias<sup>4</sup> and the preferred technique by the senior author. Delineating the boundaries of the urethral plate and therefore the incisions for creation of the neo-urethra is often challenging as the boundary between plate and glans may be indistinct. The senior author uses Chloraprep<sup>®</sup> with tint routinely for pre-operative skin preparation. The product contains chlorhexidine gluconate 20 mg/ml, Isopropyl Alcohol 70 mg/ml, purified water and Sunset Yellow (E110) tint which stains the skin an orange colour to demonstrate the area that has been cleansed.<sup>5</sup> We have found that the urethral plate stains a more intense shade of orange than the surrounding tissue and thus highlights the incision for the neo-urethra. We present a very simple method of identifying the boundaries of the urethral plate which may be incorporated into standard pre-operative preparation and as such does not add any additional operative time to the TIP Urethroplasty (Figures 1 and 2).

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**Figure 1.** Pre-operative photograph.



**Figure 2.** Intraoperative photograph following cleansing of the skin with Chloraprep®, note urethral plate stained orange.

### Conflicts of interest statement

None.

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